PART B - FEE(S) TRANSMITTAL

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maintenance fee notification		erwise iii block 1, by (a	i) specifying a new corre	spondence address,	and/or (b) indicating a sep	arate PES ADDRESS for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must		
22879 75	590 03/12/	ranna	hav	e its own certificate	of mailing or transmission.	
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HEWLETT PACKARD COMPANY P O BOX 272400, 3404 E. HARMONY ROAD INTELLECTUAL PROPERTY ADMINISTRATION				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
FORT COLLINS,	CO 80527-2400			(Depositor's name)		
						(Signature)
						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	\	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/016,199 12/11/2001		Heather N. Bean		100110043-1	4347	
TITLE OF INVENTION: D	DEVICE FOWER MA	NAGEMENT METROD	AND APPARATUS			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	06/12/2009
EXAMINER		ART UNIT	CLASS-SUBCLASS	_		
HANNETT, JAMES M		2622	348-372000		***	
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
Number is required.	DESIDENCE DATA	TO DE DRIVETO ON	<u></u>			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGN			(B) RESIDENCE: (CITY and STATE OR COUNTRY)			
		t Company, L.P.	Houston, Texas			
Please check the appropriate assignee category or categories (will not be printed on the patent):						
4a. The following fee(s) are						
Issue Fee	suomitted.	40	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed.			
All Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.			
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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).						
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Authorized Signature	Tell 1	l'Ann	The state of the s	Date	4/23/2009	
Typed or printed name _	Jeff D. L	imon			o. 45,418	
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